PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/790,640			o 1/2004	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY 🛛				HER THAN ALL ENTITY	
FOR			NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		l	N/A	385	1	N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A			N/A			N/A		
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A	N/A		N/A		N/A			N/A		
TOTAL CLAIMS (37 CFR 1.16(i))			68 minus 20 =		· 48		l	X \$9 =	432	OR	x s =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			12 minus 3 =		• 9		l	X \$43 =	387	1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sh	If the specification and dra sheets of paper, the applic is \$250 (\$125 for small en additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			n size fee due for each n thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										J			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL	1204]	TOTAL		
L	APP	OED – F		SMALL ENTITY			OTHER THAN OR SMALL ENTITY						
AMENDMENT	10/04/2007	CLAIMS REMAINING AFTER AMENDMEN	т	HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18())	• 105	Minus	↔ 10	5	= 0		X \$25 =	0	OR	x \$ =		
	Independent (37 CFR 1.16(h))	• 14	Minus	•••14		= 0	1	X \$105 =	0	OR	x s =		
Ž	Application Size Fee (37 CFR 1.16(s))												
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
L		CLAIMS REMAINING AFTER AMENDMEN		NUM PREV	HEST MBER OUSLY FOR	PRESENT EXTRA	\prod	RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Z.	Total (37 CFR 1,16(i))	•	Minus	**		=		x \$ =		OR	x s =		
AMENDMENT	Independent (37 CFR 1,16(h))	•	Minus	***				x \$ =		OR	x \$ =		
Ш	Application Size Fee (37 CFR 1.16(s))]			
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))							TOTAL		OR			
										OR	TOTAL ADD'L FEE		
** 16	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "ANTHONY WILLIAMS/ "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or Independent) is the highest number found in the appropriate box in column 1.												

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